



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

PROGRESS SHEET

COMPUTER INPUT

- ☐ APPLICATION
☐ PERMIT
☐ CERTIFICATE
☐ OTHER

WR ID# 2087331

☐ SURFACE WATER ☒ GROUND WATER

NAME <u>Tudor Hills Vineyard</u>		CONTACT: <u>Mark A Tudor (509) 882-3916 (H)</u>		TELEPHONE NO. <u>509.882.4141 (W)</u>	
ADDRESS <u>Tudor Brothers Partnership</u>		(CITY) <u>Grandview</u>		(STATE) <u>WA</u>	
P.O. Box <u>Box 525</u>				(ZIP CODE) <u>98930-0525</u>	
ASSIGNED TO		TELEPHONE NO.		DATE ASSIGNED	
ADDRESS		(CITY)		(STATE)	
				(ZIP CODE)	
APPLICATION NO. <u>64-34512-05</u>		PERMIT NO.		CERTIFICATION NO.	
DATE AMENDED		DATE CANCELLED		W.R.I.A. <u>37 YAKIMA</u>	
APPLICATION					
DATE APPLICATION RECEIVED <u>MARCH 24, 2005</u>		INITIAL \$10.00 FEE RECEIVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		DATE FEE RECEIVED <u>MARCH 24, 2005</u>	
STATEMENT OF ADDITIONAL EXAMINATION FEE \$		DATE SENT		DATE RECEIVED	
DATE RETURNED FOR COMPLETION OR CORRECTION			DATE RECEIVED		
EX R Drough TEMPORARY PERMIT					
APPROVED BY				DATE ISSUED <u>4/1/05</u>	
PUBLICATION					
APPROVED BY		DATE APPROVED		DATE NOTICE SENT	
PROTESTED BY AND DATE					
DATE AFFIDAVIT RECEIVED		CHECKED BY		TIME EXPIRED	
DATE AMENDED NOTICE SENT		DATE AFFIDAVIT RECEIVED		TIME EXPIRED	
DEPARTMENT OF FISH AND WILDLIFE REPORT					
APPROVED		PROVISO		PROTEST	
EXAMINATION					
DATE EXAMINATION MADE		MADE BY		DATE REPORT OF EXAM. WRITTEN	
WRITTEN BY		CHECKED BY			
DATE PERMIT FEE REQUESTED		AMOUNT DUE		DATE RECEIVED	
PERMIT					
PERMIT APPROVED BY		DATE APPROVED		PERMIT NO.	
DATE ISSUED					
BEGINNING OF CONSTRUCTION					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO		EXTENDED TO			
WELL DRILLER'S AND/OR CONSTRUCTION REPORT					
DATE SENT		DATE FILED			
COMPLETION OF CONSTRUCTION					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO		EXTENDED TO			
PROOF OF APPROPRIATION					
DATE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO		EXTENDED TO			
DATE CERTIFICATE FEE REQUESTED		AMOUNT DUE		DATE RECEIVED	
DATE APPROVED FOR CERTIFICATE		APPROVED BY			
CERTIFICATION					
PROOF EXAM. REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		CERTIFICATE NUMBER		DATE ISSUED	
REMARKS					